# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 30, 2002 8:00 AM**
**Secretary of State**

DOCUMENT# L99000007550

**Entity Name:** KWTL OF NAPLES, L.L.C.

**Current Principal Place of Business:**

4001 TAMIAMI TRAIL N., SUITE 350
NAPLES, FL 34103

**New Principal Place of Business:**

4001 TAMIAMI TRAIL N
SUITE 350
NAPLES, FL 34103

**Current Mailing Address:**

4001 TAMIAMI TRAIL N., SUITE 350
NAPLES, FL 34103

**New Mailing Address:**

4001 TAMIAMI TRAIL N.
SUITE 350
NAPLES, FL 34103

**FEI Number: 59-3724140** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete
Name: TCL REALTY, INC.,
Address: 4001 TAMIAMI TRAIL N., SUITE 350
City-St-Zip: NAPLES, FL 34103

Title: MGRM ( ) Delete
Name: KENT WISE,
Address: 567 HIGHPOINT RD.
City-St-Zip: PEORIA, IL 61614

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: WISE, KENT
Address: 567 HIGHPOINT RD.
City-St-Zip: PEORIA, IL 61614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL SIMS VP 04/30/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date